

# Notice of Violation

(3AAC 306.805)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: 12/7/18

Licensee: Casey Wilkins

DBA: Alaskan Kush Company

License #/Type: Marijuana Retail Stores

Address: 159 S. Franklin St., Juneau AK 99801

AMCO Case #: AM18001457

This is a notice to you as licensee that an alleged violation has occurred. If the Marijuana Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

**Note: This is not an accusation or a criminal complaint.**

On 12/06/2018 Casey Wilkins self reported to enforcement a transfer from his cultivation (4a-11605) to his retail (3a-16213) was made on 12/05/2018. The employee at the retail store got busy and failed to accept the package in METRC. The package was accepted the following day at opening of the business.

This is a violation of 3 AAC 306.330(b) Marijuana inventory tracking system

This issue was self reported and has been corrected. No further action requested by enforcement.

**3 AAC 306.805 provides that upon receipt of a Notice of Violation, a licensee may request to appear before the board and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice of Violation. A licensee may respond, either orally or in writing to the Notice. 3 AAC 306.810 (2)(A)(B)(C) failed, within a reasonable time after receiving a notice of violation, to correct any defect that is the subject of the notice of violation of AS 17.8 or this chapter.**

**IT IS RECOMMENDED THAT YOU RESPOND IN WRITING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA CONTROL BOARD.**

**\*Please send your response to the address below and include your marijuana license number in your response.**

Alcohol & Marijuana Control Office  
ATTN: Enforcement  
550 W. 7<sup>th</sup> Ave, Suite 1600  
Anchorage, Alaska 99501  
[amco.enforcement@alaska.gov](mailto:amco.enforcement@alaska.gov)

Issuing Investigator: S. Johnson

Received by:

SIGNATURE:



SIGNATURE:

Delivered VIA: Email

Date:

# Alcohol & Marijuana Control Office

Initiating License Application

5/17/2019 1:01:29 PM

**License Number:** 16213**License Status:** Active-Operating**License Type:** Retail Marijuana Store**Doing Business As:** ALASKAN KUSH COMPANY**Business License Number:** 1063457**Designated Licensee:** Casey Wilkins**Email Address:** alaskankushco@gmail.com**Local Government:** Juneau (City and Borough of)**Community Council:****Latitude, Longitude:** 58.300385, -134.404935**Physical Address:** 159 S Franklin St  
Juneau, AK 99801  
UNITED STATES**Licensee #1****Type:** Entity**Alaska Entity Number:** 10073707**Alaska Entity Name:** Alaskan Kush Company LLC**Phone Number:** 907-957-3877**Email Address:** alaskankushco@gmail.com**Mailing Address:** 159 S FRANKLIN STREET  
JUNEAU, AK 99801  
UNITED STATES**Entity Official #1****Type:** Individual**Name:** Casey Wilkins  
[REDACTED]  
[REDACTED]**Phone Number:** 907-957-3877**Email Address:** cjwalaska@gmail.com**Mailing Address:** PO Box 240588  
Douglas, AK 99824  
UNITED STATES**Entity Official #2****Type:** Individual**Name:** Herb Smyth  
[REDACTED]  
[REDACTED]**Phone Number:** 801-709-9394**Email Address:** hsmythjr@gmail.com**Mailing Address:** 4448 Mountain Side Dr  
Juneau, AK 99801  
UNITED STATES**Affiliate #1****Type:** Individual**Name:** Herb Smyth  
[REDACTED]  
[REDACTED]**Phone Number:** 801-709-9394**Email Address:** hsmythjr@gmail.com**Mailing Address:** 4448 Mountain Side Dr  
Juneau, AK 99801  
UNITED STATES**Affiliate #2****Type:** Individual**Name:** Casey Wilkins  
[REDACTED]  
[REDACTED]**Phone Number:** 907-957-3877**Email Address:** cjwalaska@gmail.com**Mailing Address:** PO Box 240588  
Douglas, AK 99824  
UNITED STATES





Alaska Marijuana Control Board

## Form MJ-20: Renewal Application Certifications

### What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

### Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Alaskan Kush Company, LLC	License Number:	16213		
License Type:	Retail Marijuana Store				
Doing Business As:	Alaskan Kush Company				
Premises Address:	159 S Franklin Street				
City:	Juneau	State:	AK	ZIP:	99801

### Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Herbert Smyth
Title:	licensee

### Section 3 – Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements:

Initials

I certify that I have **not** been convicted of any criminal charge in the previous two calendar years.

--

I certify that I have **not** committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.

--

I certify that a notice of violation has **not** been issued for this license.

--

Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

Initials

I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).

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# Form MJ-20: Renewal Application Certifications

## Section 4 – Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.

HES

I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.

HES

I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.

HES

I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.

HES

I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

HES

I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.

HES

I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.

HES

As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

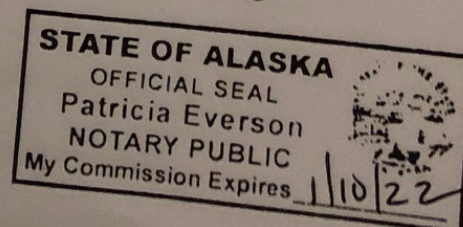
Herbert E Smyth  
Signature of licensee

Patricia Everson  
Notary Public in and for the State of Alaska

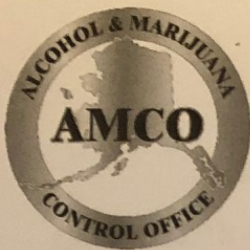
HERBERT E Smyth  
Printed name of licensee

My commission expires: 1/10/22

Subscribed and sworn to before me this 15 day of August, 2019.







Alaska Marijuana Control Board

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This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

**Section 1 – Establishment Information**

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Alaskan Kush Company, LLC	License Number:	16213		
License Type:	Retail Marijuana Store				
Doing Business As:	Alaskan Kush Company				
Premises Address:	159 S Franklin Street				
City:	Juneau	State:	AK	ZIP:	99801

**Section 2 – Individual Information**

Enter information for the individual licensee who is completing this form.

Name:	Casey Wilkins
Title:	Licensee

**Section 3 – Violations & Charges**

Read each line below, and then sign your initials in the box to the right of any applicable statements:

Initials

I certify that I have **not** been convicted of any criminal charge in the previous two calendar years.

--

I certify that I have **not** committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.

--

I certify that a notice of violation has **not** been issued for this license.

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Initials

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Initials

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CW

I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.

CW

I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.

CW

I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.

CW

I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

CW

I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.

CW

I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.

CW

As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

Casey Wilkins  
Signature of licensee

Patricia Everson  
Notary Public in and for the State of Alaska

Casey Wilkins  
Printed name of licensee

My commission expires: 1/10/22

Subscribed and sworn to before me this 24 day of June, 2019.

STATE OF ALASKA  
OFFICIAL SEAL  
Patricia Everson  
NOTARY PUBLIC  
My Commission Expires 1/10/22

